

## Form CPF 18A: Report of Independent Expenditure Promoting Election or Defeat of Candidate(s)

## Office of Campaign and Political Finance

| flice of Campaign and Po<br>ne Ashburton Place | litical l'inance |  |  |                          |           |        |  |
|--|------------------|--|--|--------------------------|-----------|--------|--|
| ston, MA 02108<br>17) 727-8352.                | g a              | <b>(</b> ). 1  | 71 7 m G   | e                        |           | 2 ASS  |  |
| . Date of Report:                              |                  | Oct 3, 2006  (Must be filed within 7 business days of expenditure(s) in excess of \$100.00 in aggregate) |  |                          |           |        |  |
| Expenditure(s) Made By:                        |                  | Massac<br>(Nam   | husetts Nurses Asso<br>e of individual or group making | ociation<br>expenditure) | r.        |        |  |
|  |                  | 340 Turnpike St., Canton 02021 Street Address City/Town Zip  |  |                          |           |        |  |
| Name of Cano                                   | lidate(s) For Wh | om the Abo   | ove Expenditure(s) Election                            | or Defeat Promoted:      | Stato     | Pop    |  |
| × ×  |                  | Cher   | of Coakley   | Ki vera /                | DIVIL     | REF    |  |
|  |                  |  | 0  | 3E**                     | 18<br>100 |        |  |
|  | v                | -  | 0  | <u> </u>                 |           |        |  |
| . Expenditure(s                                | —<br>i):         | -  |  | i                        |           |        |  |
| Expenditure(s                                  | To Whom          |  | Address  | Purpo                    |           | Amount |  |
|  |                  | ı Paid   |  |                          |           |        |  |
|  | To Whom          | ı Paid   | Address  | Purpos                   |           | Amount |  |
|  | To Whom          | ı Paid   | Address 24 Jolma Rd.                                   | Purpos                   |           | Amount |  |

I further certify that all statements made herein are true and accurate.

| Signed under the penalties of perjury: |    |     |     |
|--|----|-----|-----|
| Vahrendersen                           | 10 | /30 | 106 |
| Signature                              |    | Dat | ė   |

Katrina Anderson Director, Legislation and Government Affair:

Print Name of Individual Signer and Title (if signing on behalf of a group)

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